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Sub	stitute for form 1449/PTO	Application Number	10/678,777		
	TODALATION DISCUOSUDE	Filing Date	10/3/2003		
	FORMATION DISCLOSURE	First Named Inventor	Cutcher		
S	TATEMENT BY APPLICANT	Art Unit			
	(Use as many sheets as necessary)	Examiner Name			
Sheet	1 of 1	Attorney Docket Number	1-16375		

			U. S. PATENT	DOCUMENTS	
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ^{2 (f known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear			
		Country Code ³ "Number ⁴ "Kind Code ⁵ (if known)	MM-DD-YYYY			Τ⁵		
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Examiner Signature	Da	10	20/	Date Considered	8/5/0	 ,4

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